04/15/2008 11:00

Image# 28990812064

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Oth	er Than An	Authorize	d Committ	ee		Office Use C	Only
NAME OF COMMITTEE (in full)		MAILING LAE		ample:If typing er the lines	ı, type			
HCR Manor Care PAC	1 1 1							
		1		1 1 1 1	1 1 1 1			
ADDRESS (number and street)		orth Summit Str	eet 	1 1 1 1		1 1 1		
Check if different	16th F	loor						
than previously reported. (ACC)	Toledo)				OH	4360	4 2617
2. FEC IDENTIFICATION N	JMBER '	—	CITY 🛋			STATE	ZIP	CODE A
C00260141			3. IS THIS REPORT		NEW (N) OR		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	`´ F	Monthly Report	Feb 20 (M2)	May 20 (M5)	А	ug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	L	Oue On:	Mar 20 (M3)	Jun 20 (M6)	s	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X April 15			Apr 20 (M4)	Jul 20 (M7)	0	ct 20 (M10)	Jan 31 (YE)
July 15	(c	(c) 12-Day PRE-Election		Primary (12P)		General (12G) Runoff (12		
Quarterly Report October 15 Quarterly Report		Report for the		Convention (12C)	Specia	l (12G)	
January 31 Quarterly Report		E	Election on					the ate of
July 31 Mid-Year Report(Non-elec Year Only) (MY)		Post -Elect		General (300	3)	Runoff	(30R)	Special (30S)
Termination Rep (TER)	ort	Report for the	ne: Election on					the ate of
5. Covering Period	0 1 0	1 200	8	through	03	3 1	2008	
I certify that I have examined thi	s Report and	to the best of n	ny knowledge	and belief it is	true, correct	and complet	e.	
Type or Print Name of Treasure	er Mr. F	rank Jannazo						
Signature of Treasurer Elect	tronically File	d by Mr. Fran	ık Jannazo			Date 0	4 15	2008
NOTE : Submission of false, er	roneous, or i	ncomplete infor	mation may s	ubject the pers	on signing thi	s Report to t	he penalties of	2 U.S.C 437g.
Office Use								ORM 3X

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **HCR Manor Care PAC** [®] D " D 0 1 0 1 2008 0.3 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 59846.35 January 1 (b) Cash on Hand at 59846.35 Begining of Reporting Period 61967.64 61967.64 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 121813.99 121813.99 6(a) and 6(c) for Column B) 35062.88 35062.88 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 86751.11 86751.11 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name HCR Manor Care PAC

Report Covering the Period:

м м 0 1

From:

01

^Y 2008

. 0. 0 3

^D 3 1

^Y 2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	48800.45	48800.45
	(ii) Unitemized	13077.91	13077.91
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	61878.36	61878.36
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs) d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	61878.36	61878.36
	ransfers From Affiliated/Other larty Committees	0.00	0.00
3. A	II Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
((Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	p Federal candidates and Other Political Committees	0.00	0.00
	other Federal Receipts Dividends, Interest, etc.)	89.28	89.28
	Fransfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	61967.64	61967.64
	otal Federal Receipts subtract Line 18(c) from Line 19)	61967.64	61967.64

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party		
3	Committees	0.00	0.00
Ο.	Federal Candidates/Committees and Other Political Committees	21500.00	21500.00
1.	Independent Expenditure		
	(use Schedule E)	0.00	0.00
Э.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	13562.88	13562.88
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35062.88	35062.88
2	Total Fadoral Diahusaamanta		
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	(=====================================		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	61878.36	61878.36
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	61878.36	61878.36
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

Γ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and Si	Use separate schedule(s) for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and address of any political committee	ee to solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Martin D Allen Mailing Address 7151 Whispering Oak		Date of Receipt Date of Receipt 1 1 9 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.28207
	Sylvania FEC ID number of contributing federal political committee.	OH 43560	Amount of Each Receipt this Period 346.14
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation AVP / Dir Internal Aud & Risk Aggregate Year-to-Date ▼ 346.14	Bi-weekly payroll deducti- on \$57.69/pay
	Full Name (Last, First, Middle Initial) Tammy Barker-Cronin Mailing Address 4521 Sutton Road		Date of Receipt 0 3 1 9 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.28212
	Britton	MI 49229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	276.12
	Name of Employer HCR Manor Care, Inc.	Occupation AVP - Quality Systems	Bi-weekly payroll deducti- on \$46.02 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 276.12	
_	Full Name (Last, First, Middle Initial) Jocelyn Barnes Mailing Address 428 169th Court NE		Date of Receipt
	City	State Zip Code	0 3 1 9 2 0 0 8 Transaction ID: SA11AI.28213
	<u>Bradenton</u>	FL 34212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	210.00
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-weekly payroll deducti- on \$35.00 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
	SUBTOTAL of Receipts This Page (optional)		832.26

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Kim Elaine Byk Mailing Address 2202 Liberty St. South City Canton FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code MI 48188 C Occupation AVP Clinical Support Systems Aggregate Year-to-Date ▼ 287.16	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Charlie F Byrne Mailing Address 4685 Rio Poco Court City Naples FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code FL 33109 C Occupation Sr Administrator Aggregate Year-to-Date 210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. William Chenevert Mailing Address 620 Ashbury Drive City Perrysburg FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43551 C Occupation Vice President, Operations Support Aggregate Year-to-Date ▼ 1140.00	Date of Receipt M M
SUBTOTAL of Receipts This Page (optional)		1637.16

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 42 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	,	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Steven H Chowen			Date of Receipt
Mailing Address 1398 Penniman Av	e.		03 19 2008
City	State	Zip Code	Transaction ID: SA11AI.28238
plymouth FEC ID number of contributing federal political committee.	C	48170	Amount of Each Receipt this Period 300.00
Name of Employer HCR ManorCare Inc.	Occupation Administ		Bi-weekly payroll deduction \$50.00 /pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ms Pamela Cox			Date of Receipt
Mailing Address 6238 Shadowood C	Circle		03 19 2008
City Naples	State FL	Zip Code 34112	Transaction ID: SA11AI.28241 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	OTTIE	210.00
Name of Employer HCR.ManorCare, Inc.	Occupation Administ		Bi-weekly payroll deduction \$35.00 /pay
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Karen L Davidson			Date of Receipt
Mailing Address 612 W. Magnolia			03 19 2008
City	State	Zip Code	Transaction ID: SA11AI.28247
Pana FEC ID number of contributing federal political committee.	C	62557	Amount of Each Receipt this Period 311.52
Name of Employer HCR ManorCare Inc.	Occupation Dir^ Clini	n cal Services	Bi-weekly payroll deducti- on \$51.92 /pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 311.52	
SUBTOTAL of Receipts This Page (optional	al)		821.52

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Doherty Mailing Address 55 Princeton Terrace City Oakland FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General	State Zip Code NJ 07436 C Occupation Administrator Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) David K Donin Mailing Address 11608 Everglade Cou		Date of Receipt M M D D 7 Y Y Y Y Y Y Y Y Y
City North Potomac FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	State Zip Code MD 20878 C Occupation Administrator Aggregate Year-to-Date 212.03	Transaction ID: SA11AI.28256 Amount of Each Receipt this Period 212.03 Bi-weekly payroll deduction \$30.29/pay
Full Name (Last, First, Middle Initial) Ms Nancy Edwards Mailing Address 5726 Rolbesay Drive City Dublin FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc.	State Zip Code OH 43017 C Occupation General Manager, Central Division	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 1152.00	1614.03

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) HCR Manor Care PAC	I Statements may not be sold or used by any personal he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) R Michael Ferguson Mailing Address 2450 Underhill Rd		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Toledo	State Zip Code OH 43615	Transaction ID: SA11AI.28266 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	346.20
Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation VP & Dir of Purchasing Aggregate Year-to-Date ▼ 346.20	Bi-weekly payroll deducti- on \$57.70 /pay
Full Name (Last, First, Middle Initial) Karen L Forrest Mailing Address 3115 Wynstone Dr		Date of Receipt 0 3 1 9 2 0 0 8
City	State Zip Code	Transaction ID: SA11Al.28271
Quincy FEC ID number of contributing federal political committee.	IL 62305	Amount of Each Receipt this Period 341.88
Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-weekly payroll deducti- on \$56.98 /pay
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 341.88	
Full Name (Last, First, Middle Initial) A. Louise Forsha		Date of Receipt
Mailing Address P. O. Box 418		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.28133
Albrightsville FEC ID number of contributing federal political committee.	PA 18210	Amount of Each Receipt this Period 250.00
Name of Employer HCR Manor Care, Inc.	Occupation Administrator - Hampton House	Credit Card Contribution - Visa
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		938.08
TOTAL This Period (last page this line numb	·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary I	the (check only one)
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by name and address of any political co	v any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Larry Robert Godla Mailing Address 1556 Mary Ellen Court		Date of Receipt
	City Mclean	State Zip Code VA 22101	0 3 1 9 2 0 0 8 Transaction ID: SA11AI.28276 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	461.52
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)		Bi-weekly payroll deducti- on \$76.92 /pay
	Full Name (Last, First, Middle Initial) Mr. John Graham Mailing Address 3000 Riva Ridge Rd		Date of Receipt 0 3 19 2008
	City	State Zip Code	Transaction ID: SA11AI.28279
	Toledo	OH 43615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	923.10
	Name of Employer HCR.ManorCare, Inc.	Occupation VP/GM - Heartland Hospice	Bi-weekly payroll deducti- on \$153.85 /pay
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	23.10
	Full Name (Last, First, Middle Initial) Ruth G Graziano		Date of Receipt
	Mailing Address 503 Elk Mills Road		03 / 19 / 2008
	City	State Zip Code	Transaction ID: SA11AI.28280
	Oxford FEC ID number of contributing federal political committee.	PA 19363	Amount of Each Receipt this Period 323.10
	Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-weekly payroll deducti- on \$53.85 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	23.10
	SUBTOTAL of Receipts This Page (optional)		1707.72

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/</u>	Full Name (Last, First, Middle Initial) Stephen L Guillard Mailing Address 217 Garden St. City Needham FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General	State Zip Code MA 02492 C Occupation Executive Vice President Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Other (specify) Full Name (Last, First, Middle Initial) Kevin C Henricks Mailing Address 23 Chicago St. Apt.G City Plainfield	State Zip Code IL 60544	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Regional Director of Operation Aggregate Year-to-Date 240.00	Bi-weekly payroll deduction \$40.00 /pay
	Full Name (Last, First, Middle Initial) Timothy M Hock Mailing Address 8054 Tillicum Grove N City Rockford FEC ID number of contributing federal political committee.	North State Zip Code MI 49341	Date of Receipt M M M
_	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Occupation Regional Director of Ops Aggregate Year-to-Date 230.76	Bi-weekly payroll deduction \$38.46 /pay
	SUBTOTAL of Receipts This Page (optional) .		1624.62

I ⁻	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS Any information copied from such Reports and S	Use separate schedule(s for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1 1 1 1 1 1 1 1
	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	name and address of any political commit	tee to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Sharon Hollins Mailing Address 3311 Gallatin Road		Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Toledo	State Zip Code OH 43606	Transaction ID: SA11AI.28137
	FEC ID number of contributing federal political committee.	OH 43606	Amount of Each Receipt this Period 1500.00
	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Asst General Counsel - Legal Aggregate Year-to-Date ▼ 1500.00	Contribution
- 3.	Full Name (Last, First, Middle Initial) Lynn M Hood Mailing Address 15415 Meadow Wood	Dr	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.28293
	Wellington	FL 33414	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	570.00
	Name of Employer HCR ManorCare Inc.	Occupation Asst General Mgr	Bi-weekly payroll deducti- on \$95.00 /pay
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 570.00	٥
	Full Name (Last, First, Middle Initial) Mr. John Huber Mailing Address 26448 Carronade Drive	Date of Receipt	
	City	State Zip Code	0 3 1 9 2 0 0 8 Transaction ID: SA11Al.28295
	<u>Perrysburg</u>	OH 43551	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	270.00
	Name of Employer HCR.ManorCare, Inc.	Occupation Regional Director of Operations	Bi-weekly payroll deducti- on \$45.00 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
	SUBTOTAL of Receipts This Page (optional)		2340.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 42 (check only one) X 11a
or fo	or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	HCR Manor Care PAC		
 -	Full Name (Last, First, Middle Initial) Rebecca J Hullinger		Date of Receipt
1	Mailing Address 1250 Horseshoe Cir #1	05	03 19 7 2008
	City	State Zip Code	Transaction ID: SA11AI.28296
_	Ann Arbor	MI 48108	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	240.00
Ī	Name of Employer HCR ManorCare Inc.	Occupation Clinical Prog Implem Consult	Bi-weekly payroll deducti- on \$40.00 /pay
Ī	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 240.00	
	Full Name (Last, First, Middle Initial) Frank A Jannazo		Date of Receipt
-	Mailing Address 3466 Country Farms R	03 19 2008	
(City	State Zip Code	Transaction ID: SA11Al.28297
-	Oregon	OH 43616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	210.00
Ī	Name of Employer HCR ManorCare Inc.	Occupation Dir^ Accounts Receivable	Bi-weekly payroll deducti- on \$35.00 /pay
Ī	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	210.00	
	Full Name (Last, First, Middle Initial) Ms Diane Johnson		Date of Receipt
Ī	Mailing Address 206 Ruth Road	03 19 2008	
(City	State Zip Code	Transaction ID: SA11Al.28299
-	Fleetwood	PA 19522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	431.28
_	Name of Employer HCR.ManorCare, Inc.	Occupation Regional Director of Operations	Bi-weekly payroll deducti- on \$71.88 /pay
Ī	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 431.28	
	IDTOTAL (D TI: D / .:)		881.28

SCHEDULE A (FEC FITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 42 (check only one) X 11a
Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In F HCR Manor Care PAC	than using the name and a	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Nancy E Johnson Mailing Address 4266 Shir City Hillard FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For:	State OH C Occupat Region	Zip Code 43026 ion al Director of Ops tte Year-to-Date ▼	Date of Receipt M M M
Primary General Other (specify) ▼ Full Name (Last, First, Middle Andrew Koha Mailing Address 7620 Isaa	nitial)	295.38 Zip Code	Date of Receipt M M M
Middleburg Heights FEC ID number of contributing federal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	OH C Occupat RDO - Aggrega	44130	Amount of Each Receipt this Period 300.00 Bi-weekly payroll deduction \$50.00 /pay
Full Name (Last, First, Middle Amy LaFleur Mailing Address 207 S. An City Saline FEC ID number of contributing federal political committee. Name of Employer HCR. Manor Care, Inc Receipt For: Primary General Other (specify)	State MI C Occupat Region Aggrega	Zip Code 48176 ion al Director of Operations tte Year-to-Date ▼ 234.00	Date of Receipt M M M
SUBTOTAL of Receipts This Pa	ge (optional)		829.38

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 42 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may no e name and addres	t be sold or used by any pers s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. David Lanning Mailing Address 806 Copley Lane City Silver Spring FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc.	State MD C Occupation Vice Preside	Zip Code 20904 ent, Development	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 625.00	
	Full Name (Last, First, Middle Initial) Terry L Lawrence Nelson Mailing Address 1880 Oldfield Dr.			Date of Receipt 0 3 1 9 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.28318
	Huntingtown	MD	20639	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		219.24
	Name of Employer HCR ManorCare Inc.		vices ConsultantRN	Bi-weekly payroll deducti- on \$36.54 /pay
	Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 219.24	
	Full Name (Last, First, Middle Initial) Larry C Lester	Date of Receipt		
	Mailing Address 13507 Westbrook			03 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Plymouth	State MI	Zip Code 48170	Transaction ID: SA11AI.28319
	FEC ID number of contributing federal political committee.	C	46170	Amount of Each Receipt this Period 510.00
	Name of Employer HCR ManorCare Inc.	, '	r^ VP Marketing	Bi-weekly payroll deducti- on \$85.00 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 510.00	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		1354.24

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or fo	r information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
. <u> </u>	Full Name (Last, First, Middle Initial) Carrie Lund Mailing Address 14802 Dunston Place City Tampa	State Zip Code FL 33618	Date of Receipt M M M
† 1 !	FEC ID number of contributing rederal political committee. Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Sr. Administrator - Palm Harbor Aggregate Year-to-Date 265.38	Bi-weekly payroll deduction \$44.23 /pay
. <u>.</u>	Full Name (Last, First, Middle Initial) Joya Marotta Mailing Address 1037 NW 18th Avenue City Boca Raton FEC ID number of contributing federal political committee.	State Zip Code FL 33486 C	Date of Receipt M M J J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Name of Employer HCR Manor Care, Inc. Receipt For: Primary General Other (specify)	Occupation Administrator Aggregate Year-to-Date 1000.00	Contribution
<u> </u>	Full Name (Last, First, Middle Initial) Deborah A McMonagle Mailing Address 1632 Patricia Ave City Willow Grove FEC ID number of contributing	State Zip Code PA 19090	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
1	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation General Manager Aggregate Year-to-Date ▼ 377.52	Bi-weekly payroll deduction \$29.04 /pay
SII	BTOTAL of Receipts This Page (optional)		1642.90

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A	ny information copied from such Reports and Story commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \ .	Full Name (Last, First, Middle Initial) Murry J Mercier Mailing Address 7110 Oak Bluff Lane			Date of Receipt
	City Maumee	State OH	Zip Code 43537	Transaction ID: SA11AI.28338 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1153.86
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	 	n f Information Serv e Year-to-Date ▼ 1153.86	Bi-weekly payroll deduction \$192.31 /pay
	Full Name (Last, First, Middle Initial) Scott Miller Mailing Address 198 Old Mill Drive			Date of Receipt 0 3 19 2008
	City	State	Zip Code	Transaction ID: SA11AI.28342
	FEC ID number of contributing federal political committee.	PA C Occupation	19047	Amount of Each Receipt this Period 253.86 Bi-weekly payroll deduction \$42.31 /pay
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	Sr Admir		on \$42.31 /pay
	Full Name (Last, First, Middle Initial) Mr. Doug Mock Mailing Address 308 Fast Front Street			Date of Receipt
				03 7 31 7 2008
	City Perrysburg	State OH	Zip Code 43551	Transaction ID: SA11AI.28139 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer HCR Manor Care, Inc.	Occupation Regional	n Director of Ops	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional) .	1		2407.72

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 42 (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	g the name and add	ness of any political committee to	Solicit Contributions from Such Committees.
Full Name (Last, First, Middle Initial) Spencer Moler			Date of Receipt
Mailing Address 8645 Ponte Vedra	Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11Al.28344
Holland	OH	43528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1153.86
Name of Employer HCR Manor Care, Inc.	Occupation VP/Contr		Bi-weekly payroll deducti- on \$192.31/pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.86	
Full Name (Last, First, Middle Initial) Ms Susan Morey	l		Date of Receipt
Mailing Address 700 Hunters Road	03 19 2008		
City	State	Zip Code	Transaction ID: SA11AI.28346
Mohnton	PA	19540	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer HCR.ManorCare, Inc.	Occupation Regional	n Director of Operations	Bi-weekly payroll deducti- on \$50.00 /pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms Joylin Nation	 		Date of Receipt
Mailing Address 15985 Voyageurs F	0 3 1 9 2 0 0 8		
City	State	Zip Code	Transaction ID: SA11AI.28350
West Palm Beach	FL	33414	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		230.76
Name of Employer HCR Manor Care, Inc. Occupatio		n dministrator	Bi-weekly payroll deducti- on \$38.46/pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	
SUBTOTAL of Receipts This Page (options	I		1684.62

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16			
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) HCR Manor Care PAC	nd Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) David K Nees Mailing Address 5315 Rymoor Drive City Sylvania FEC ID number of contributing	State Zip Code OH 43560	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Receipt For: Primary Other (specify)	Occupation Associate General Counsel Aggregate Year-to-Date 504.00	Bi-weekly payroll deducti- on \$84.00 /pay			
Full Name (Last, First, Middle Initial) Linda Neumann Mailing Address 28 Roslyn Road		Date of Receipt M			
City Grosse Pointe Shor	State Zip Code MI 48236	Transaction ID: SA11AI.28352 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	Occupation Regional Director of Operation Aggregate Year-to-Date 324.00	Bi-weekly payroll deduction \$54.00/pay			
Full Name (Last, First, Middle Initial) Gordon C Ochs Mailing Address 2505 Waterford Co	Gordon C Ochs				
City Palmetto FEC ID number of contributing	State Zip Code FL 34221	Transaction ID: SA11AI.28354 Amount of Each Receipt this Period 300.00			
Receipt For: Primary Other (specify) ▼	Occupation Regional Director of Operation Aggregate Year-to-Date ▼ 300.00	Bi-weekly payroll deducti- on \$50.00 /pay			
SUBTOTAL of Receipts This Page (option:	al)	1128.00			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Annette Orlowski Mailing Address 669 Highway 60 City Cedarburg FEC ID number of contributing federal political committee. Name of Employer HCR.ManorCare, Inc.	State Zip Code WI 53012 C Occupation Director, Clinical Services	Date of Receipt M M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.98	
Full Name (Last, First, Middle Initial) Paul A. Ormond Mailing Address 2420 Underhill Road		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.28120
<u>Toledo</u>	OH 43615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00 Contribution
Name of Employer HCR.ManorCare, Inc.	Occupation President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Susan Ormond		Date of Receipt
Mailing Address 2420 Underhill Road		03 / 03 / 2008
City	State Zip Code	Transaction ID: SA11AI.28121
Toledo FEC ID number of contributing federal political committee.	OH 43615	Amount of Each Receipt this Period 5000.00
Name of Employer HCR Manor Care, Inc.	Occupation CEO Admin Asst.	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional)		10346.98

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16 11
\ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	Statements may n e name and addre	ot be sold or used by any pers sss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> A.	Full Name (Last, First, Middle Initial) Ann E Otley Mailing Address 333 W Wooster St City Bowling Green	State OH	Zip Code 43402	Date of Receipt M M M
	FEC ID number of contributing federal political committee.	C		Bi-weekly payroll deduction \$35.00 /pay
	Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify) ▼	, '	Corporate Benefits ear-to-Date ▼ 210.00	on \$35.00 /páy
_ 3.	Full Name (Last, First, Middle Initial) Mr. James Pagoaga Mailing Address 21 Winding Creek Driv	Date of Receipt 0 3 0 3 2 0 0 8		
	City	State	Zip Code	Transaction ID: SA11AI.28122
	Sylvania FEC ID number of contributing federal political committee.	ОН	43560	Amount of Each Receipt this Period 5000.00 Contribution
	Name of Employer HCR.ManorCare, Inc. Receipt For: Primary General Other (specify) ▼		dent, Rehabilitation ear-to-Date ▼ 5000.00	
- :.	Full Name (Last, First, Middle Initial) Mr. David Parker Mailing Address 2154 Tremont Road	Date of Receipt		
		03 19 2008		
	City Columbus	State OH	Zip Code 43212	Transaction ID: SA11AI.28357 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		392.28
	Name of Employer HCR.ManorCare, Inc.	Occupation VP Assista	nt General Manager	Bi-weekly payroll deducti- on \$65.38 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 392.28	
	SUBTOTAL of Receipts This Page (optional)	1		5602.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 42 (check only one) X 11a 11b 11c 12 13 14 15 16		
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
HCR Manor Care PAC				
Full Name (Last, First, Middle Initial) Richard A Parr II		Date of Receipt		
Mailing Address 2253 Gray Fox Court		03 19 2008		
City	State Zip Code	Transaction ID: SA11AI.28358		
Ann Arbor	MI 48103	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1153.86		
Name of Employer HCR Manor Care, Inc.	Occupation VP - General Counsel & Secretary	Bi-weekly payroll deduction \$192.31 /pay		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	1153.86			
Full Name (Last, First, Middle Initial) Deborah A Parziale		Date of Receipt		
Mailing Address 8850 Little Creek Roa	03 26 2008			
City	State Zip Code	Transaction ID: SA11AI.28360		
Reno	NV 89506	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	210.00		
Name of Employer HCR Manor Care, Inc.	Occupation Administrator	Bi-weekly payroll deducti- on \$30.00 /pay		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	210.00			
Full Name (Last, First, Middle Initial) David III Pipkin		Date of Receipt		
Mailing Address 9211 Marydell Rd	•			
City	State Zip Code	0 3 1 9 2 0 0 8 Transaction ID: SA11Al.28365		
Ellicott City	MD 21042	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	293.70		
Name of Employer HCR ManorCare Inc.	Occupation Regional Director of Operation	Bi-weekly payroll deducti- on \$48.95/pay		
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	293.70			
		1657.56		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 42 (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	ille name and add	aress of any political committee to	o solicit committee.
Full Name (Last, First, Middle Initial) Clifton J Porter II			Date of Receipt
Mailing Address 3929 Azalea Circle			03 19 2008
City	State	Zip Code	Transaction ID: SA11AI.28366
Maumee FEC ID number of contributing federal political committee.	ОН	43537	Amount of Each Receipt this Period 369.18
Name of Employer HCR ManorCare Inc.	Occupation AVP^ Go	n overnment Relations	Bi-weekly payroll deducti- on \$61.53/pay
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 369.18	
Full Name (Last, First, Middle Initial) Michael J Reed			Date of Receipt
Mailing Address 3899 Midshore Drive	03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Naples	State FL	Zip Code 34109	Transaction ID: SA11AI.28372 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			519.24
Name of Employer HCR Manor Care, Inc.	Occupation VP Assis	n Ited Living Operations	Bi-weekly payroll deducti- on \$86.54 /pay
Receipt For: Primary General Other (specify) ▼	· ·	e Year-to-Date ▼ 519.24	
Full Name (Last, First, Middle Initial) Margaret A Reitmeyer			Date of Receipt
Mailing Address 13 Gregory Drive	03 19 2008		
City	State	Zip Code	Transaction ID: SA11AI.28373
Kenvil FEC ID number of contributing federal political committee.	NJ C	07847	Amount of Each Receipt this Period 204.36
Name of Employer HCR Manor Care, Inc. Regional		n Director of Operations	Bi-weekly payroll deducti- on \$34.06 /pay
Receipt For: Primary General Other (specify) ▼	_ , '	e Year-to-Date ▼ 204.36	
SUBTOTAL of Receipts This Page (optional)		1092.78

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 42 (check only one) X
or for comm	tion copied from such Reports and S ercial purposes, other than using the F COMMITTEE (In Full) anor Care PAC	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Nam John I Re	e (Last, First, Middle Initial)	1		Date of Receipt
City Toledo	2/20 110/10/11 110/90 110	State OH	Zip Code 43617	Transaction ID: SA11AI.28374 Amount of Each Receipt this Period
FEC ID r	number of contributing olitical committee.	C		895.44
Receipt F	Employer norCare Inc. For: mary General ner (specify)		n ncial Services e Year-to-Date ▼ 895.44	Bi-weekly payroll deducti- on \$149.24/pay
Damian N	le (Last, First, Middle Initial) M Rodgers Address 4647 Calico Court	Date of Receipt 0 3 1 9 2 0 0 8		
City		State	Zip Code	Transaction ID: SA11AI.28377
<u>Monclo</u>	va	OH	43542	Amount of Each Receipt this Period
federal p	number of contributing olitical committee.	С		211.86
	Employer nor Care, Inc.	Occupatio Legal Co	ounsel	Bi-weekly payroll deduction \$35.31 /pay
	mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 211.86	
Full Nam Glen Roe	e (Last, First, Middle Initial) buck			Date of Receipt
Mailing A	ddress 314 Forest Road			03 19 2008
City		State	Zip Code	Transaction ID: SA11AI.28378
	number of contributing olitical committee.	C	52803	Amount of Each Receipt this Period 240.00
	Employer norCare Inc.	, ' 	Director of Operation	Bi-weekly payroll deducti- on \$40.00 /pay
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 240.00	
SUBTOTA	L of Receipts This Page (optional)	1		1347.30

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 42 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) HCR Manor Care PAC	atements may not be sold or used by any per- name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Richard G Rump Mailing Address 2423 Heather Glen Dr City Maumee FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43537 C Occupation Dir^ Corporate Communication Aggregate Year-to-Date 296.52	Date of Receipt M M J D D J 2008 Transaction ID: SA11AI.28382 Amount of Each Receipt this Period 296.52 payroll deduction
В.	Full Name (Last, First, Middle Initial) Francis J Schmitt Mailing Address 4007 Thistle Hill Court City Sugar Land FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code TX 77479 C Occupation VP^ Operations Aggregate Year-to-Date ▼ 480.00	Date of Receipt M M
_ C.	Full Name (Last, First, Middle Initial) Bruce G Schroeder Mailing Address 10945 Lakeview Dr City Whitehouse FEC ID number of contributing federal political committee. Name of Employer HCR ManorCare Inc. Receipt For: Primary General Other (specify)	State Zip Code OH 43571 C Occupation AVP Home Health Aggregate Year-to-Date 360.00	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
t	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		1136.52

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 42 (check only one) X
or for commercial purposes, other than using the	Statements may not be sold or used by any personal name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Ms Elizabeth Schupp		Date of Receipt
Mailing Address 1022 Oakview Drive City	State Zip Code	03 / 31 / 2008
Highland Heights	OH 44143	Transaction ID: SA11AI.28149 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer HCR.ManorCare, Inc.	Occupation Administrator	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Susan Sexton	<u> </u>	Date of Receipt
Mailing Address 7645 Yawberg Road		03 19 7 7 7 7
City	State Zip Code OH 43571	Transaction ID: SA11AI.28391
Whitehouse FEC ID number of contributing federal political committee.	OH 43571	Amount of Each Receipt this Period 200.22
Name of Employer HCR Manor Care, Inc.	Occupation Senior Manager - Tax	Bi-weekly payroll deducti- on \$33.37/pay
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.22	
Full Name (Last, First, Middle Initial) Theresa J Smelser		Date of Receipt
Mailing Address 202 N. Elm Hurst Rd		03 19 2008
City Prospect Heights	State Zip Code IL 60070	Transaction ID: SA11AI.28396 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	178.32
Name of Employer HCR ManorCare Inc.	Occupation Sr Administrator	Bi-weekly payroll deducti- on \$29.72 /pay
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 278.32	
SUBTOTAL of Receipts This Page (optional)		1128.54

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(Check Grilly Grie)
	Statements may not be sold or used by any	y person for the purpose of soliciting contributions
or for commercial purposes, other than using the	ne name and address of any political comm	ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCR Manor Care PAC		
Full Name (Last, First, Middle Initial) Steven D Spencer		Date of Receipt
Mailing Address 1102 Towsley Ln		03 05 2008
City	State Zip Code	Transaction ID: SA11AI.28401
Ann Arbor	MI 48105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HCR ManorCare Inc.	Occupation VP Human Resources	Bi-weekly payroll deducti- on \$50.00 /pay
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.0	00
Full Name (Last, First, Middle Initial) Steven D Spencer	·	Date of Receipt
Mailing Address 1102 Towsley Ln		03 / 01 / 2008
City	State Zip Code	Transaction ID: SA11AI.28141
Ann Arbor	MI 48105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer HCR ManorCare Inc.	Occupation VP Human Resources	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.0	00 "
Full Name (Last, First, Middle Initial) Anthony J Stinson		Date of Receipt
Mailing Address 3 Lynnefield Court		03 26 2008
City	State Zip Code	Transaction ID: SA11AI.28406
Medford	NJ 08055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	235.97
Name of Employer HCR ManorCare Inc.	Occupation Administrator	Bi-weekly payroll deducti- on \$33.71 /pay
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	235.9	97

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each cat	te schedule(s) tegory of the mmary Page	(check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or	used by any person	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) HCR Manor Care PAC	the name and address of any po	milical committee to sc	once contributions from such committee.
Full Name (Last, First, Middle Initial) Rami Ubaydi			Date of Receipt
Mailing Address 27134 Pumpkin Stre	eet		03 19 2008
City	State Zip Code		Transaction ID: SA11Al.28410
Murrieta	CA 92562		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		253.86
Name of Employer HCR Manor Care, Inc.	Occupation Regional Director of C	Operations	Bi-weekly payroll deducti- on \$42.31/pay
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	253.86	
Full Name (Last, First, Middle Initial) Mr. Douglas Wanke	-		Date of Receipt
Mailing Address 13908 Pondview Ro	ad		03 19 2008
City	State Zip Code		Transaction ID: SA11AI.28413
Silver Spring	MD 20905		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		330.00
Name of Employer HCR.ManorCare, Inc.	Occupation Director of Health Pla	nning	Bi-weekly payroll deducti- on \$55.00 /pay
Receipt For:	Aggregate Year-to-Date	▼	
Primary General Other (specify) ▼		330.00	
Full Name (Last, First, Middle Initial) Susan Ward			Date of Receipt
Mailing Address 12 Arapaho			03 27 2008
City	State Zip Code		Transaction ID: SA11AI.28415
Shawnee	OK 74801		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		249.99
Name of Employer HCR Manor Care, Inc.	Occupation Administrator		Bi-weekly payroll deducti- on \$19.23/pay
Receipt For:	Aggregate Year-to-Date	▼	
Primary General Other (specify) ▼		249.99	
SUBTOTAL of Receipts This Page (optional	1		833.85

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Crieck offly offe)
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	HCR Manor Care PAC		
•	Full Name (Last, First, Middle Initial) Joe Wilson		Date of Receipt
	Mailing Address 7720 Sagamore Hills E		03 31 7 2008
	City Sagamore Hills	State Zip Code OH 44067	Transaction ID: SA11AI.28144 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer HCR Manor Care, Inc.	Occupation Administrator - Mayfield Heights	Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0
	Full Name (Last, First, Middle Initial) Dan Wood		Date of Receipt
	Mailing Address 844 Miami Street		03 19 2008
	City	State Zip Code	Transaction ID: SA11Al.28422
	Toledo	OH 43605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	381.60
	Name of Employer HCR ManorCare Inc.	Occupation Asst General Mgr	Bi-weekly payroll deducti- on \$63.60 /pay
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	381.6	0
	Full Name (Last, First, Middle Initial) Ms Sherriann Wood		Date of Receipt
	Mailing Address 5 Aberfield Lane		03 19 YYYY 2008
	City Miamisburg	State Zip Code OH 45342	Transaction ID: SA11AI.28423 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	323.10
	Name of Employer HCR.ManorCare, Inc.	Occupation RDO - Central Division Region 2	Bi-weekly payroll deducti- on \$53.85 /pay
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 323.1	0
	URTOTAL of Receipts This Page (optional)		1004.70

A.

FOR LINE NUMBER: PAGE 31 / 42 **SCHEDULE A (FEC Form 3X)** Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Date of Receipt Cynthia M Zalewski Mailing Address 3845 Drummond Rd 03 19 2008 City State Zip Code Transaction ID: SA11AI.28428 Toledo OH 43613 Amount of Each Receipt this Period FEC ID number of contributing 220.44 C federal political committee. Bi-weekly payroll deduction \$36.74 /pay Name of Employer HCR ManorCare Inc. Occupation Senior Attorney Receipt For: Aggregate Year-to-Date Primary General 220.44 Other (specify)

SUBTOTAL of Receipts This Page (optional)	>	220.44
TOTAL This Period (last page this line number only)	•	48800.45

0	CHEDULE B (FEC Form 3X)	Use separate schedule(s	1 -	NUMBER: PAGE 32 / 42
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22
	y Information copied from such Reports and Stater for commercial purposes, other than using the name		ed by any person	for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	e and address of any politica	ar committee to so	nicit contributions from Such committee
	Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS			Transaction ID: SB23.28195 Date of Disbursement
	Mailing Address 14 KNIGHTSWOOD DF	IVE		03 0 3 1 7 2 0 0 8
	City MARLTON	State Zip Code NJ 08053		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation Candidate Name		Category/	1000.00
		ement For: 2008 Primary General Other (specify)	Туре	
	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS			Transaction ID: SB23.28187 Date of Disbursement
	Mailing Address P.O. Box 261060			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} \end{bmatrix}$
	City Los Angeles	State Zip Code CA 90026		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation			1000.00
	Candidate Name		Category/ Type	
	• =	ement For: 2008 Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) BILL FOSTER FOR CONGRESS COMMI	TTEE		Transaction ID: SB23.28182 Date of Disbursement
	Mailing Address PO Box 703			$ \begin{bmatrix} 0 & 3 & M \\ 0 & 3 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 0 \\ 0 & 4 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 0 \\ 0 & 4 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & M \end{bmatrix} $ $ \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & M \end{bmatrix} $
	City Geneva	State Zip Code IL 60134		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation for event held on 03/08/2008 Candidate Name		Category/	5000.00
	Office Sought: House Disburs	ement For: 2008	Туре	
	Senate President	Primary General Other (specify) ▼ I-Primary		
				1

	ENIZED DISCUSSION	Use separate schedule	(S)	(check or	IE NUMBE nly one)			AGE 33	0 / 42
П	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 280	25	-
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC								
	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Con	nmittee				action IE	D: SB23.	28169	
	Mailing Address 430 S Capitol Street SE				0 ^M 1	M / D	14	y y 0	8 0
	City Washington	State Zip Code DC 20003			Amou	nt of Eac	h Disburs		
	Purpose of Disbursement Donation for event held on 01/16/2008 Candidate Name				L.			2000	0.00
		ement For: 2008		tegory/ Γype					
	Office Sought: House Disburse Senate President State: District:	Primary X General Other (specify)	al						
	Full Name (Last, First, Middle Initial) JOHN BOCCIERI FOR CONGRESS				Date of	of Disburs			
	Mailing Address PO BOX 3016				0 2	M / D	22 /	y žo	0 8 °
	City ALLIANCE	State Zip Code OH 44601			Amou	nt of Eac	h Disburs		
	Purpose of Disbursement Donation							1000	0.00
	Candidate Name			tegory/ Гуре					
	°	ement For: 2008 Primary General Other (specify)	al						
	Full Name (Last, First, Middle Initial) Kay Hagan for US Senate				Date o	of Disburs			
	Mailing Address PO BOX 29103				0,3	M / D	25	žo	8 0
	City GREENSBORO	State Zip Code NC 27429			Amou	nt of Eac	h Disburs		
	Purpose of Disbursement Donation				_ L.			2000	0.00
	Candidate Name			tegory/ Гуре					
	Office Sought: House Disburs	ement For: 2008	J						
		Primary General Gener	ii						

ITE	HEDULE B (FEC Form :	ر ۸د	se sepa	rate schedule(s)		E NUMBER: PAGE 34 / 42
	EMIZED DISBURSEMEN	TS fo	r each c	category of the Summary Page	(check or 21b 27	nly one) 22
						n for the purpose of soliciting contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	9 110 1141110 4110		o o any pomioa		
	Full Name (Last, First, Middle Initial) MASSA FOR CONGRESS					Transaction ID: SB23.28198 Date of Disbursement
	Mailing Address 59 EAST MARK	ET STREET	SUITE	244		03 / 03 / 2008
	City CORNING	State NY		Zip Code 14830		Amount of Each Disbursement this Perio
	Purpose of Disbursement Refund of Contribution from 10/29/07					-1000.00
	Candidate Name				tegory/ ype	
	Office Sought: House Senate President	Disbursemen X Prir Oth		2008 General		
	State: District: Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMIT	TEE '08				Transaction ID: SB23.28194 Date of Disbursement
	Mailing Address PO BOX 1496					$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & O \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & N \\ Z & O & O & 8 \end{smallmatrix} \end{bmatrix}$
	City LOUISVILLE	State KY		Zip Code 40201		Amount of Each Disbursement this Period
	Purpose of Disbursement Donation					4000.00
	Candidate Name				tegory/ ype	
				2008		
	Office Sought: House Senate President State: District:	Disbursemen X Prir Oth		General		
	Senate	X Prir	mary	General		Transaction ID: SB23.28189 Date of Disbursement
	Senate President State: District: Full Name (Last, First, Middle Initial)	X Prir	mary	General		
	Senate President State: District: Full Name (Last, First, Middle Initial) SALAZAR FOR SENATE	X Prir	mary ner (spec	General		Date of Disbursement May May 25 Y 2008 Amount of Each Disbursement this Period
	Senate President District: Full Name (Last, First, Middle Initial) SALAZAR FOR SENATE Mailing Address PO BOX 600 City	X Prin Oth	mary ner (spec	General cify) ▼ Zip Code		Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Senate President District: Full Name (Last, First, Middle Initial) SALAZAR FOR SENATE Mailing Address PO BOX 600 City DENVER Purpose of Disbursement	X Prin Oth	mary ner (spec	General cify) ▼ Zip Code	tegory/ Type	Date of Disbursement May May 25 Y 2008 Amount of Each Disbursement this Period
	Senate President District: Full Name (Last, First, Middle Initial) SALAZAR FOR SENATE Mailing Address PO BOX 600 City DENVER Purpose of Disbursement Donation for Event held on 03/26/08	State CO Disbursemen Prir	mary ner (spec	General cify) ▼ Zip Code 80201 2008 X General		Date of Disbursement May May 25 Y 2008 Amount of Each Disbursement this Period

TEMPER DISPURSEMENTS	Use separate schedule(s	(check on		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29	26
Any Information copied from such Reports and Stator for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) HCR Manor Care PAC				
Full Name (Last, First, Middle Initial) STEPHANIE TUBBS JONES FOR US C Mailing Address 3729 SILSBY RD	CONGRESS		Transaction ID: SB23.28183 Date of Disbursement M M M / D D D / Y Y Y O Y O D O O O O O O O O O O O O O	8 ^Y
City UNIVERSITY HEIGHTS Purpose of Disbursement Donation for Event held on 03/13/08 Candidate Name	State Zip Code OH 44118	Category/	Amount of Each Disbursement this 1000.	
	rsement For: 2008 Primary X General Other (specify)	Type		
Full Name (Last, First, Middle Initial) TIM RYAN FOR CONGRESS Mailing Address 1600 Roosevelt Avenu Suite 804	е		Transaction ID: SB23.28175 Date of Disbursement M M M / D D D / Y Y O O	8 ^Y
City Niles Purpose of Disbursement Donation for event held on 02/17/2008 Candidate Name	State Zip Code OH 44446	Category/ Type	Amount of Each Disbursement this 1000.	
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) LIDALL FOR COLORADO INC	rsement For: 2008 X Primary General Other (specify) ▼		Transaction ID: SB23,28190	
UDALL FOR COLORADO INC Mailing Address 8690 Wolff Court #200			Date of Disbursement O 3	8 ^Y
City Westminster Purpose of Disbursement Donation for Event held on 04/02/08 Candidate Name	State Zip Code CO 80031	Category/ Type	Amount of Each Disbursement this 1000.	
Office Sought: Senate President State: District:	rsement For: 2008 X Primary General Other (specify)			
	(la		3000.0	00

ITE	HEDULE B (FEC Form 3 MIZED DISBURSEMENT	/ Use separate se	ry of the	(check only	NUMBER: PAGE 36 / 42 y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	Information copied from such Reports ar r commercial purposes, other than using				for the purpose of soliciting contributions licit contributions from such committee
\	NAME OF COMMITTEE (In Full) HCR Manor Care PAC				
\ -	Full Name (Last, First, Middle Initial) Nynn For Congress Mailing Address 1129 20th Street	NW			Transaction ID: SB23.28173 Date of Disbursement O 2 O 7 O 7 O 8
	C/O Mitchell and Dity Vashington	Titus, LLP	Code 036		Amount of Each Disbursement this Period
_	Purpose of Disbursement Conation for event held on 02/06/2008 Candidate Name		Ca	ategory/	1000.00
	Office Sought: Senate President State: District:	Disbursement For: X Primary Other (specify)	2008 General	Туре	

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	21500.00

SCHEDOLL B (I LC I OIIII 3)	Use separate schedule(s	FOR LINE NUMBER: (check only one)	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		
		ed by any person for the purpose of soliciting contributional committee to solicit contributions from such committee	
Full Name (Last, First, Middle Initial) Bruce Caswell for State Representa Mailing Address 8940 East Bacon		Transaction ID: SB29.28168 Date of Disbursement M M M / D D D / Y Y Y O	Ď8 [°]
City Hillsdale Purpose of Disbursement Donation Candidate Name	State Zip Code MI 49242	Amount of Each Disbursement thi	is Period
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼	Type	
Full Name (Last, First, Middle Initial) Citizens for Sears Mailing Address 6711 Monroe Stree Bldg 2 Suite D	et	Transaction ID: SB29.28185 Date of Disbursement M M M / D D D / Y Y Y O O	Ď8 [°]
City Sylvania Purpose of Disbursement Donation Candidate Name	State Zip Code OH 43560	Amount of Each Disbursement the 1000 Category/ Type	
Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Citizens for Wagoner	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB29.28177	
Citizens for Wagoner Mailing Address 7445 Airport High	way	Date of Disbursement M 2 M / D 2 D / Y Y Y O	Ó 8 °
City Holland Purpose of Disbursement Donation Candidate Name	State Zip Code OH 43528	Amount of Each Disbursement thin 1000 Category/ Type	
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (o	ntional)	2125	.00

	CHEDULE B (FEC FOIII 3X)	Use separate schedule	(S) (chac	LINE NUMBER: PAGE 38 / 42 ck only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e 22	1b 22 23 24 25 7 28a 28b 28c X 29
	y Information copied from such Reports and State or commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) HCR Manor Care PAC	, ,		
<u> </u>	Full Name (Last, First, Middle Initial) Committee to Elect Kathy Angerer			Transaction ID: SB29.28179 Date of Disbursement
	Mailing Address P.O. Box 157			02
	City Dundee	State Zip Code MI 48131		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation			300.00
	Candidate Name		Category Type	
	Office Sought: House Disburs Senate President State: District:	sement For: Primary Gener Other (specify)	al	
	Full Name (Last, First, Middle Initial) Committee to Elect Mark C. Jansen for S	tate Senate		Transaction ID: SB29.28184 Date of Disbursement
	Mailing Address 6670 Kalamazoo Avenu Suite E-128	ie		03
	City Grand Rapids	State Zip Code MI 49508		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation for Event held on 03/27/08			250.00
	Candidate Name		Category Type	1/
	Office Sought: House Senate President State: District:	sement For: Primary Gener Other (specify) ▼	al	
	Full Name (Last, First, Middle Initial) Committee to Re-Elect Sheila Leslie			Transaction ID: SB29.28188 Date of Disbursement
	Mailing Address 4550 W. Oakey Blvd #9	99B		03 7 25 7 2008
	City Las Vegas	State Zip Code NV 89102		Amount of Each Disbursement this Perio
	Purpose of Disbursement Donation for Event held on 04/01/08 Candidate Name		Category	1000.00
	Office Sought: House Senate President State: District:	sement For: Primary Gener Other (specify) ▼	Type al	
	5.00.100			

IT	CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)	FOR LINE	
•	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	/ one) 22
				27	28a 28b 28c X 29
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam				
_	NAME OF COMMITTEE (In Full)				
\rangle	HCR Manor Care PAC				
	Full Name (Last, First, Middle Initial)				Transaction ID: SB29.28174
	House Democratic Caucus Fund				Date of Disbursement
	Mailing Address 271 E. State Street				0 2 1 1 2 0 0 8
	City Columbus	State OH	Zip Code 43215		Amount of Each Disbursement this Period
	Purpose of Disbursement	011	40210		1500.00
	Donation				
	Candidate Name			Category/ Type	
	Office Sought: House Disburs	ement For:		. 7/2 -	
	Senate	Primary	General		
	President State: District:	Other (spe	ecity) 🔻		
	Full Name (Last, First, Middle Initial)				Transaction ID: SB29,28178
	House Republican Campaign Committee				Date of Disbursement
	Mailing Address P.O. Box 11787				$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
	City Harrisburg	State PA	Zip Code 17108		Amount of Each Disbursement this Period
	Purpose of Disbursement	17	17100		1000.00
	Donation				
	Candidate Name			Catagory	
	Candidate Name			Category/ Type	
	Office Sought: House Disburs	ement For:			
	Office Sought: House Disburs Senate	Primary	General		
	Office Sought: House Disburs	_			
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	Primary			Transaction ID: SB29.28192
	Office Sought: House Senate President State: District:	Primary			Date of Disbursement
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	Primary			
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street	Primary			Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus Purpose of Disbursement	Primary Other (spe	ecify) ▼ Zip Code		Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus	Primary Other (spe	ecify) ▼ Zip Code	Type Category/	Date of Disbursement M 3 M / D 3 D / Y Y Y O 8 Amount of Each Disbursement this Period
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus Purpose of Disbursement Donation Candidate Name	Primary Other (spe	ecify) ▼ Zip Code	Туре	Date of Disbursement M 3 M / D 3 D / Y Y Y O 8 Amount of Each Disbursement this Period
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus Purpose of Disbursement Donation Candidate Name	Primary Other (spe	ecify) ▼ Zip Code	Type Category/	Date of Disbursement M 3 M / D 3 D / Y Y Y O N 8 Amount of Each Disbursement this Period
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus Purpose of Disbursement Donation Candidate Name Office Sought: House Senate President	Primary Other (spe	Zip Code 43215	Type Category/	Date of Disbursement M 3 M / D 3 D / Y Y Y O N 8 Amount of Each Disbursement this Period
	Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) O'Connor for Supreme Court Mailing Address 100 E. Broad Street Suite 2330 City Columbus Purpose of Disbursement Donation Candidate Name Office Sought: House Senate	Primary Other (spe	Zip Code 43215	Type Category/	Date of Disbursement M 3 M / D 3 D / Y Y O N 8 Amount of Each Disbursement this Period

Betailed Sammary Lage	PAGE 40 / 42
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from s NAME OF COMMITTEE (In Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Senate Democratic Fund Mailing Address P.O. Box 111111 City State Zip Code Lansing MI 48901 Purpose of Disbursement Donation Candidate Name Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) Senate Republican Campaign Committee Mailing Address P.O. Box 792 City State Zip Code Harrisburg PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Disbursement For: Senate PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Disbursement For: Senate Primary General Primary General Orther (specify) ▼ Transaction ID: SB: Category/ Type Transaction ID: SB: Date of Disbursement Donation for Event held on 03/31/08 Category/ Type Office Sought: House Other (specify) ▼ Transaction ID: SB: Date of Disbursement Donation for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code OH 43209 Purpose of Disbursement Donation of Disbursement Donation of Disbursement Donation of Amount of Each Dist	24 25 28c X 29
NAME OF COMMITTEE (In Full) HCR Manor Care PAC Full Name (Last, First, Middle Initial) Senate Democratic Fund Mailing Address P.O. Box 11111 City State Zip Code Lansing MI 48901 Purpose of Disbursement Donation Candidate Name Office Sought: House President Primary General President Other (specify) ▼ City State Zip Code Lansing MI 48901 Amount of Each Dist Transaction ID: SB: Date of Disbursement Donation Category/ Type Type Transaction ID: SB: Date of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Primary General Other (specify) ▼ Transaction ID: SB: Date of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Primary General Other (specify) ▼ Transaction ID: SB: Date of Disbursement Donation for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code OH 43209 Purpose of Disbursement Donation of Supreme Court Committee Amount of Each Dist Transaction ID: SB: Date of Disbursement Date of	
Senate Democratic Fund Mailing Address P.O. Box 11111 City State Zip Code Lansing MI 48901 Purpose of Disbursement Donation Candidate Name Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Senate Republican Campaign Committee Mailing Address P.O. Box 792 City State Zip Code House Primary General Prose of Disbursement For: Category/ Type Transaction ID: SB: Date of Disbursement Donation for Event held on 03/31/08 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General Primary General District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code OH A3209 Purpose of Disbursement Donation for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code OH A3209 Amount of Each District: Amount of Each District District: Amount of Each District District District District District Amount of Each District District District District Amount of Each District District District District District District District Amount of Each District Dis	
City Lansing MI 48901 Purpose of Disbursement Donation Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Senate Republican Campaign Committee Mailling Address P.O. Box 792 City State Zip Code PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Primary General PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Office Sought: House Primary General Other (specify) ▼ Transaction ID: SB: Date of Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailling Address 260 N. Cassady Avenue City State Zip Code OH 43209 Amount of Each District Amount of Each District Primary General Other (specify) Type OH A3209 Amount of Each District Primary General Other (specify) Type OH A3209	
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Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Senate Republican Campaign Committee Mailing Address P.O. Box 792 City State Zip Code Harrisburg PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Other (specify) ▼ Amount of Each District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code Amount of Each District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code Other (specify) ▼ Amount of Each District: City Columbus OH 43209 Purpose of Disbursement Donation	
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City State Zip Code Harrisburg PA 17108 Purpose of Disbursement Donation for Event held on 03/31/08 Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code OH 43209 Purpose of Disbursement Donation Amount of Each District: Transaction ID: SB; Date of Disbursement Donation Amount of Each District: Amount of Each District: Transaction ID: SB; Date of Disbursement Disbursement Disbursement Donation	
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Donation for Event held on 03/31/08 Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code Columbus OH 43209 Purpose of Disbursement Donation Amount of Each District State District State Description of Each District State State Description of Each District State Description of Each District State Description of Each Description of Each District State Description of Each District State Description of Each District State Description of Each Descr	oursement this Perio
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code Columbus OH 43209 Purpose of Disbursement Donation Disbursement For: Primary General Other (specify) ▼ Transaction ID: SB2 Date of Disbursement Donation Amount of Each Disbursement Donation	2500.00
Stratton for Supreme Court Committee Mailing Address 260 N. Cassady Avenue City State Zip Code Columbus OH 43209 Purpose of Disbursement Donation Amount of Each Disbursement Donation	
City State Zip Code Amount of Each Disk Columbus OH 43209 Purpose of Disbursement Donation	
Columbus OH 43209 Purpose of Disbursement Donation	2008
Donation	• • • • •
Candidate Name Category/	1000.00
Туре	
Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	
State: District:	

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C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 41 / 42		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 28c	25 X 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	e and address or any political col	THITILLEE TO SOII	CIT CONTINUATIONS	TIOTI SUCTICE	Jillillillee	
HCR Manor Care PAC						
Full Name (Last, First, Middle Initial) Susan Peters for Supervisor			Transaction I Date of Disbu		167	
Mailing Address P.O. Box 19172			01	1 1 Y	ž 0 0 8 °	
City Sacramento	State Zip Code CA 95819		Amount of Eac	ch Disbursen	nent this Peri	iod
Purpose of Disbursement Donation for Event held on 01/17/2008					500.00	
Candidate Name	C	Category/ Type				
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial)			T	D CD00 00	170	
The Huntington National Bank			Transaction I Date of Disbut	rsement	-	ı
Mailing Address P.O. Box 5065			0 1	15	žoŏsŤ	
City Cleveland	State Zip Code OH 44101-0065		Amount of Eac	ch Disbursen		iod
Purpose of Disbursement Service Fees - Jan 08					55.08	
Candidate Name		Category/ Type				
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)					
Full Name (Last, First, Middle Initial) The Huntington National Bank			Transaction I Date of Disbu	rsement		
Mailing Address P.O. Box 5065			02 /	15 / Y	ž 0 0 8 °	
City Cleveland	State Zip Code OH 44101-0065		Amount of Eac	ch Disbursen		iod
Purpose of Disbursement Service Fees - Feb 08					41.60	
Candidate Name		Category/ Type				
Office Sought: Senate President State: Disburs Disburs	ement For: Primary General Other (specify)					
SUBTOTAL of Disbursements This Page (optional)		<u></u>			596.68	
TOTAL This Period (last page this line number only)					

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President

District:

19e# 20990012103			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) HCR Manor Care PAC			
Full Name (Last, First, Middle Initial) The Huntington National Bank Mailing Address P.O. Box 5065			Transaction ID: SB29.28172 Date of Disbursement M 3 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cleveland Purpose of Disbursement	State Zip Code OH 44101-0065		Amount of Each Disbursement this Period 41.20
Service Fees - Mar 08 Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) WHCA-PAC			Transaction ID: SB29.28181 Date of Disbursement
Mailing Address 121 East Wilson Street Suite L200			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & O & B \end{smallmatrix} \end{bmatrix}$
City Madison	State Zip Code WI 53703		Amount of Each Disbursement this Period
Purpose of Disbursement Donation			1750.00
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate	sement For: Primary General		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	1791.20
TOTAL This Period (last page this line number only)	•	13562.88

Other (specify)

State: